

## CONFIDENTIAL

Please print on corp/school letterhead

<i>Fax</i>		Corp # _____
		School # _____
To:	<b>IDOE – EIS Division</b>	Sender
	<b>STN TEAM</b>	Name: _____
Fax:	<b>317-233-6326</b>	Fax: _____
Phone:	317-232-0808	Phone: _____
Date:		# Pages: _____
Subject:	<b>LEGAL NAME CHANGE/STATUS CHANGE</b>	

STN Required	Original	Change	Reason Required
STN:	Last Name		
	First Name		
	Middle Name		
	Suffix		

**Reason for Name Change:**

A = Adopted  
E = Reported in Error to the Application Center  
M = Married (Student married)  
L = Legal Name Change

**Reason for Status Change:**

D = Deceased  
P = Protective order issued

Note: Reporting a *Status Change* prevents the display of information in the Application Center, produces a message to contact DOE Administrator for further assistance.

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